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COMMUNICABLE DISEASE CENTER

Morbidity and Mortality

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WEEKLY REPORT

Week Ending February 6, 1965

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE

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INFLUENZA AND INFLUENZA-LIKE ILLNESS

SUMMARY: United States

Group A influenza infections have been confirmed by laboratory methods in 7 States since early January. In addition to outbreaks previously reported in Maine, New Jersey, Connecticut, Pennsylvania, Massachusetts and Missouri (MMWR, Vol. 14, Nos. 3 and 4), additional laboratory confirmed influenza has occurred in New York State and Vermont. Influenza-like illness has been observed in focal outbreaks in Mississippi and New Hampshire. Laboratory confirmation of these outbreaks is in process.

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At present, A_2 influenza virus isolates have been obtained only in Pennsylvania and New York State. The outbreaks continue to be scattered and focal within the involved States. With the exception of Mississippi and Missouri, all States reporting outbreaks thus far are

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Table 1. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
(Cumulative totals include revised and delayed reports through previous weeks)

Disease	5th Week Ended		Median 1960 - 1964	Cumulative, First 5 Weeks		
	February 6, 1965	February 1, 1964		1965	1964	Median 1960 - 1964
Aseptic meningitis	17	19	23	143	136	130
Brucellosis	–	8	8	21	27	27
Diphtheria	2	4	13	15	22	73
Encepholitis, primary infectious	24	29	---	147	139	---
Encephalitis, post-infectious	16	8	---	68	31	---
Hepotitis, infectious including serum hepatitis	891	983	1,225	3,995	4,465	5,321
Meosles	7,994	7,123	9,793	34,387	29,002	40,656
Meningocaccal infections	61	67	59	319	272	269
Poliomyelitis, Totol	–	–	8	1	5	46
Poralytic	–	–	3	1	3	29
Nanporalytic	–	–	---	–	2	---
Unspecified	–	–	---	–	–	---
Streptococcal Sare Thraat and Scarlet fever	11,713	10,212	9,590	51,299	44,074	42,349
Tetanus	5	4	---	17	24	---
Tularemia	2	3	---	31	39	---
Typhaid fever	6	17	9	32	35	35
Rabies in Animols	90	74	73	458	318	301

Table 2. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax:	1	Rabies in Man:	–
Botulism:	–	Smallpox:	–
Leptaspirasis: Ohio – 1	3	Trichinosis: R.I. – 1	18
Molaria: Conn. – 1	1	Typhus –	
Plogue:	–	Murine: Conn. – 1	1
Psittacasis:	2	Rky. Mt. Spatted: Po. – 2, Tenn. – 1	6

INFLUENZA AND INFLUENZA-LIKE ILLNESS
Summary: United States – Continued

located in the New England and Middle Atlantic areas. Attention is again called to the charted influenza and pneumonia mortality data reported to CDC from 122 United States cities. It is apparent that the reported influenza and pneumonia deaths in the New England cities, barely below the epidemic threshold last week, is clearly elevated above the threshold this week. This elevation most likely reflects the increased influenza activity already observed in this area.

In addition, a rise and subsequent fall in influenza and pneumonia deaths occurred in the Middle Atlantic States during January.

EPIDEMIOLOGIC REPORTS
INFLUENZA – State Reports

New York

Upper respiratory illness has been prevalent throughout the State during the past weeks. There has, however, been no significant absenteeism in schools or industry to date. Well localized, sharply defined outbreaks of febrile upper respiratory illness have not been observed. Three A_2 influenza viruses have been isolated from sporadic cases during mid-January in Albany and Columbia Counties.

(Reported by Dr. Robert M. Albrecht, Director, Epidemiology Division, New York State Department of Health).

Vermont

Since mid-January, outbreaks of acute febrile respiratory disease with systemic symptoms have been noticed in Windsor, Windham, and Orange Counties. This illness is reflected in school absenteeism varying from 17 to 41 percent.

Serologic confirmation of influenza A has been reported from Addison and Windsor Counties. Virus isolation attempts are pending.

(Reported by Dr. Linus J. Leavens, Director, Division of Communicable Disease Control, Vermont Department of Health).

New Hampshire

A general increase of influenza-like illness has been noticed in New Hampshire during the past few weeks. School Absenteeism has been increased in Concord, with some school closures in Manchester. Pediatricians in the Keene area have noticed increased numbers of "flu-like" illnesses and have obtained laboratory specimens which are now being processed.

(Reported by Dr. Mary Atchison, Director, Division of Public Health, New Hampshire State Department of Health).

Missouri

A_2 influenza has been identified in two patients by means of hemagglutination inhibition tests. These cases of febrile upper respiratory infection occurred in Princeton, Missouri.

(Reported by CDC Kansas City Field Station)

Mississippi

A focal outbreak of acute febrile respiratory disease was reported from the rural area of Rankin County on January 25. The illness was characterized by rapid onset, fever, chills, headache, arthralgias and upper respiratory symptoms. School absenteeism ranged from 15 percent to 20 percent. The first appearance of disease was noticed in school age children, however, sizable numbers of secondary cases in families are now being observed. Serologic confirmation of this outbreak is in process.

The remainder of the State has not experienced an excess occurrence of respiratory illness.

(Reported by Durward L. Blakey, M.D., Director, Division of Preventable Disease Control, Mississippi State Board of Health).

INTERNATIONAL NOTES
INFLUENZA

EUROPE

Eastern Germany

(Information on January 29, 1965). – The WHO Regional Virus Reference Laboratory, Prague, has reported by telephone to the WHO that outbreaks of influenza-like illness occurred early in January in Eastern Germany, mainly in the North towards the Baltic coast. Many scattered outbreaks have been observed. Scrological evidence of infection with virus A_2 has been obtained and 4 strains of virus A_2 have been isolated by laboratories in Eastern Germany.

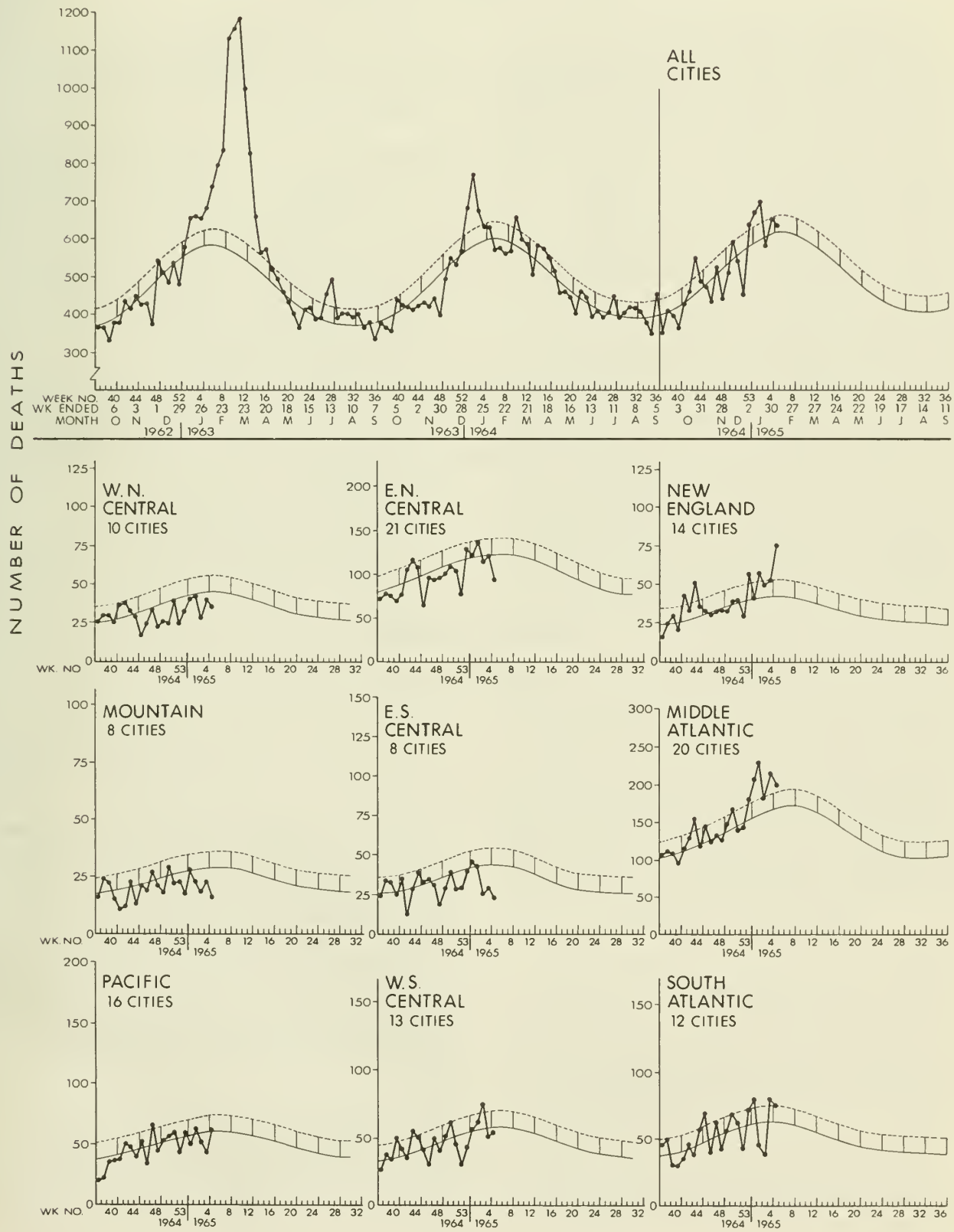
France

(Information on January 25, 1965). – Serological evidence of infection with virus A_2 was obtained in Paris and the Paris region, and also in the East, West and Center of the country. Serological evidence of infection with virus B was obtained in Paris and its suburbs, and in the North-East of the country (Aisne department).

(Reported in the Weekly Epidemiological Record of the World Health Organization, February 5, 1965)

(Continued on page 45)

PNEUMONIA-INFLUENZA DEATHS IN 122 UNITED STATES CITIES



RUBELLA IN CONTACTS OF INFANTS WITH RUBELLA-ASSOCIATED ANOMALIES

Nine cases of rubella among medical personnel caring for infants with rubella-associated anomalies have recently been documented by a group at the New York University School of Medicine. Demonstration further that a large proportion of children with rubella-associated anomalies excrete rubella virus, sometimes for long periods following birth, indicates that the risk of acquired infection from these children may be high indeed.

The group at the New York University School of Medicine has recently studied more than 100 infants with congenital defects thought to be caused by rubella infection acquired in utero. An interfering agent with properties characteristic of rubella virus has been isolated from throat swabs, urine specimens and/or rectal swabs obtained from 60-70% of these patients. Although the well-recognized "classical" defects such as congenital heart disease and cataracts have been seen most frequently, more obscure conditions such as thrombocytopenic purpura and/or splenomegaly without any detectable anomaly have also been associated with viral excretion.

In questioning some of the nursery and pediatric ward personnel who have cared for these infants at hospitals throughout New York City, they encountered 8 nurses and 1 resident physician who developed an illness typical of rubella with an onset of symptoms approximately two to three weeks after close and prolonged physical contact with these babies (see table).

In two nurses, the diagnosis of rubella was confirmed by isolation of virus from throat swabs obtained at the time of rash (cases 1 & 9). Rubella in another nurse (case 4) was followed by a similar illness in her room-mate 14 and 18 days later. The resident physician's illness preceded rubella in his wife and small child by 16 days.

Of particular significance is the fact that certain of the infants excreted virus for a number of months. In Case 3 for example, the defective infant was almost 9 months old at the time of contact with nurse Dav.

Typical cases are summarized:

Case 1. Bar., a 30-year-old married nurse, was exposed to many pregnant patients with rubella in the spring of 1964 when she worked in the Obstetrics Clinic. In August 1964, she was transferred to the Premature Nursery. On November 23, she admitted a newborn infant with typical rubella-associated defects and cared for this infant daily thereafter. On December 16, she developed typical rubella manifested by a maculopapular rash, occipital, post-auricular, cervical, axillary and inguinal adenopathy, and low grade fever. The diagnosis was confirmed by isolation of virus from her throat swab on the third day of rash. Rubella virus had previously been detected in throat and rectal swabs obtained from the infant.

Case 4. Dow., a 33-year-old single nurse, cared for a newborn infant with severe rubella embryopathy on October 25 and 26, 1964 prior to leaving for vacation. On November 16, while still on vacation, she developed rubella characterized by a rash which persisted for 3 days, occipital and post-auricular lymph adenopathy, and painful swelling of her interphalangeal joints and wrists. The arthritis cleared after 48 hours. Her roommate, a nurse who worked in another unit at the same hospital, developed a similar illness with rash, adenopathy and joint manifestations 14 to 16 days later. The newborn infant was shown to be excreting rubella virus in throat swab and urine specimens.

Case 8. Sha., a 28-year-old pediatric resident, was exposed on November 10, 1964, to a one month old infant with "rubella syndrome", characterized by congenital heart disease and cataracts. He examined this infant regularly until November 29, when he developed rubella manifested by rash, adenopathy and back pain. Sixteen days later, his wife and child also developed typical rubella. The defective infant was still a virus-excretor when last studied at the age of 2½ months. No attempt was made to isolate virus from the pediatric resident or his family.

Two features common to the 9 cases described provide strong circumstantial evidence implicating these virus-excreting infants as the source of rubella infection. One is the incubation period, an appropriate 2 to 3 weeks after intimate contact. The second is the low incidence of rubella in the general community at the present time.

In view of these observations, it is recommended that infants born with rubella-associated anomalies be managed with the same precautions employed for patients with rubella. It obviously is most important for women in the first trimester of pregnancy to avoid exposure to these infants.

(Report submitted by Louis Z. Cooper, M.D., Robert H. Green, M.D., Saul Krugman, M.D., Joan P. Giles, M.D. and George S. Mirick, M.D. Departments of Medicine and Pediatrics, New York University School of Medicine, New York, N.Y.)

HOSPITAL PERSONNEL DEVELOPING RUBELLA AFTER CARING FOR INFANTS WITH "RUBELLA SYNDROME"

Name	Occupation	Age	Sex	Time of Intimate Contact with Possible Virus-Excreting Infants	Time of Onset of Rash
1. Bar*	Nurse	30	F	November 23 – December 15	December 16
2. Col.	Nurse	21	F	December 7 – December 24	December 25
3. Dav.	Nurse	20	F	September 10 – October 29	November 2
4. Dow.	Nurse	33	F	October 25 – October 26	November 9
4. Edw.	Nurse	26	F	October 25 – December 4	December 5
6. Fie.	Nurse	21	F	August 22 – November 5	November 6
7. Gre.	Nurse	23	F	December 18 – January 8	January 9
8. Sha.	Physician	28	M	November 10 – November 28	November 29
9. Woi.*	Nurse	26	F	December 15 – January 10**	January 18

* Rubella virus isolated from throat swab at time of illness.

** Infant with multiple, classical rubella anomalies and history of maternal rubella during first trimester of pregnancy.

INTERNATIONAL NOTES

INFLUENZA

(Continued from page 42)

U.S.S.R.

(Information on January 29, 1965). – Outbreaks of influenza have been reported by telephone to the WHO by the WHO Virus Reference Center in Moscow. The preliminary reports from Moscow indicate that an epidemic began in Leningrad about January 9, reached its peak about January 18 and is now declining. Some thousands of cases occurred but the incidence was less than in the epidemic there 3 years ago. Many of the cases were in children. The disease was not severe.

Within the past few days, a sharp increase in influenza-like illness has also been reported from Archangelsk in the North, Khabarovsk in the East, and from Tallin, Riga and Moscow.

Influenza virus A_2 was isolated from cases in Leningrad and Moscow. The primary isolations were made with some difficulty. The strains have been sent to the 2 International Influenza Centers (London and Atlanta) for further study.

Since December about 4 million people in the USSR have been vaccinated with live influenza vaccine. Because of the low incidence of influenza in the past 2 or 3 years in the USSR, it was thought that an epidemic might occur this year and clinics and hospitals increased their supplies of antibiotics and other drugs as a precaution.

ASIA

Japan

(Information on February 1, 1965). – Sporadic outbreaks of influenza-like illness are being reported. A strain of influenza virus A_2 has been isolated from a case in a Tokyo suburb.

(Reported in the Weekly Epidemiological Record of the World Health Organization, February 5, 1965)

SUMMARY OF REPORTED CASES OF INFECTIOUS SYPHILIS JANUARY 1965 - JANUARY 1964

CASES OF PRIMARY AND SECONDARY SYPHILIS: BY REPORTING AREA, JANUARY 1965 AND JANUARY 1964 - PROVISIONAL DATA

Reporting Area	January		Cumulative January	
	1965	1964	1965	1964
NEW ENGLAND	29	43	39	43
Maine	-	-	-	-
New Hampshire	1	1	1	1
Vermont	-	-	-	-
Massachusetts	21	31	21	31
Rhode Island	2	2	2	2
Connecticut	15	9	15	9
MIDDLE ATLANTIC	394	391	394	391
Upstate New York	31	57	31	57
New York City	252	210	252	210
Pa. (Excl. Phila.)	16	12	16	12
Philadelphia	12	21	12	21
New Jersey	83	91	83	91
EAST NORTH CENTRAL	227	197	227	197
Ohio	39	52	39	52
Indiana	3	12	3	12
Downstate Illinois	20	10	20	10
Chicago	87	68	87	68
Michigan	74	52	74	52
Wisconsin	4	3	4	3
WEST NORTH CENTRAL	40	51	40	51
Minnesota	7	7	7	7
Iowa	4	5	4	5
Missouri	18	20	18	20
North Dakota	-	-	-	-
South Dakota	4	9	4	9
Nebraska	5	6	5	6
Kansas	2	4	2	4
SOUTH ATLANTIC	567	547	567	547
Delaware	5	12	5	12
Maryland	37	38	37	38
District of Columbia	44	46	44	46
Virginia	37	36	37	36
West Virginia	4	1	4	1
North Carolina	65	67	65	67
South Carolina	77	48	77	48
Georgia	95	87	95	87
Florida	203	212	203	212

Reporting Area	January		Cumulative January	
	1965	1964	1965	1964
EAST SOUTH CENTRAL	223	123	223	123
Kentucky	8	6	8	6
Tennessee	57	28	57	28
Alabama	114	69	114	69
Mississippi	44	20	44	20
WEST SOUTH CENTRAL	191	179	191	179
Arkansas	12	14	12	14
Louisiana	63	49	63	49
Oklahoma	14	9	14	9
Texas	102	107	102	107
MOUNTAIN	44	49	44	49
Montana	1	-	1	-
Idaho	1	2	1	2
Wyoming	-	-	-	-
Colorado	2	1	2	1
New Mexico	9	24	9	24
Arizona	20	13	20	13
Utah	6	4	6	4
Nevada	5	5	5	5
PACIFIC	172	243	172	243
Washington	9	8	9	8
Oregon	4	8	4	8
California	157	223	157	223
Alaska	1	2	1	2
Hawaii	1	2	1	2
U. S. TOTAL	1,897	1,823	1,897	1,823
TERRITORIES	63	65	63	65
Puerto Rico	62	63	62	63
Virgin Islands	1	2	1	2

Note: Cumulative Totals include revised and delayed reports through previous months.

DEATHS IN 122 UNITED STATES CITIES THROUGH THE WEEK ENDING FEBRUARY 6, 1965

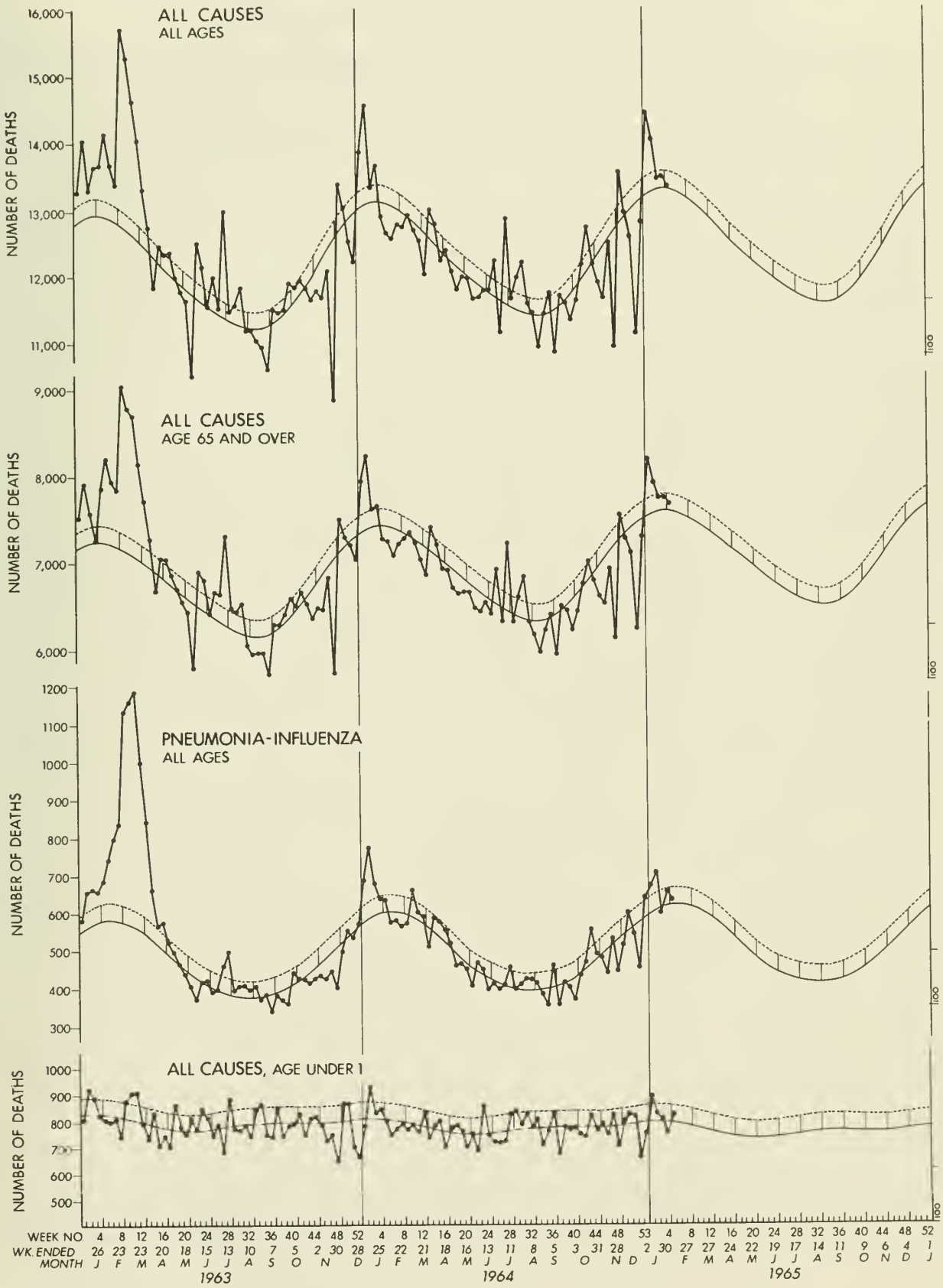


Table 3. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDED
FEBRUARY 6, 1965 AND FEBRUARY 1, 1964 (5TH WEEK)

Area	Aseptic Meningitis		Encephalitis		Poliomyelitis						Diphtheria	
			Primary	Post-Inf.	Total Cases			Paralytic				
						Cumulative			Cumulative			Cum.
	1965	1964	1965	1965	1965	1965	1964	1965	1965	1964	1965	1965
UNITED STATES...	17	19	24	16	-	1	5	-	1	3	2	15
NEW ENGLAND.....	-	1	2	1	-	-	-	-	-	-	-	-
Maine.....	-	-	-	-	-	-	-	-	-	-	-	-
New Hampshire.....	-	-	-	-	-	-	-	-	-	-	-	-
Vermont.....	-	-	-	-	-	-	-	-	-	-	-	-
Massachusetts.....	-	1	1	-	-	-	-	-	-	-	-	-
Rhode Island.....	-	-	-	1	-	-	-	-	-	-	-	-
Connecticut.....	-	-	1	-	-	-	-	-	-	-	-	-
MIDDLE ATLANTIC.....	3	2	2	2	-	-	-	-	-	-	-	1
New York City.....	2	-	1	-	-	-	-	-	-	-	-	1
New York, Up-State.	1	1	-	2	-	-	-	-	-	-	-	-
New Jersey.....	-	1	-	-	-	-	-	-	-	-	-	-
Pennsylvania.....	-	-	1	-	-	-	-	-	-	-	-	-
EAST NORTH CENTRAL...	1	2	9	3	-	-	-	-	-	-	-	1
Ohio.....	-	-	2	-	-	-	-	-	-	-	-	-
Indiana.....	-	-	1	-	-	-	-	-	-	-	-	1
Illinois.....	-	1	-	2	-	-	-	-	-	-	-	-
Michigan.....	1	1	5	1	-	-	-	-	-	-	-	-
Wisconsin.....	-	-	1	-	-	-	-	-	-	-	-	-
WEST NORTH CENTRAL...	1	1	2	-	-	-	-	-	-	-	-	3
Minnesota.....	-	-	-	-	-	-	-	-	-	-	-	-
Iowa.....	-	-	-	-	-	-	-	-	-	-	-	-
Missouri.....	-	-	-	-	-	-	-	-	-	-	-	1
North Dakota.....	1	-	1	-	-	-	-	-	-	-	-	-
South Dakota.....	-	-	-	-	-	-	-	-	-	-	-	1
Nebraska.....	-	-	-	-	-	-	-	-	-	-	-	1
Kansas.....	-	1	1	-	-	-	-	-	-	-	-	-
SOUTH ATLANTIC.....	3	4	3	-	-	-	3	-	-	2	-	4
Delaware.....	-	2	-	-	-	-	-	-	-	-	-	-
Maryland.....	-	-	1	-	-	-	-	-	-	-	-	-
Dist. of Columbia..	1	-	-	-	-	-	-	-	-	-	-	-
Virginia.....	1	-	-	-	-	-	-	-	-	-	-	-
West Virginia.....	-	-	-	-	-	-	-	-	-	-	-	-
North Carolina.....	-	-	1	-	-	-	1	-	-	-	-	1
South Carolina.....	-	-	-	-	-	-	-	-	-	-	-	-
Georgia.....	-	-	-	-	-	-	-	-	-	-	-	1
Florida.....	1	2	1	-	-	-	2	-	-	2	-	2
EAST SOUTH CENTRAL...	-	2	1	-	-	-	1	-	-	-	1	2
Kentucky.....	-	1	-	-	-	-	-	-	-	-	-	-
Tennessee.....	-	-	1	-	-	-	1	-	-	-	-	-
Alabama.....	-	1	-	-	-	-	-	-	-	-	1	1
Mississippi.....	-	-	-	-	-	-	-	-	-	-	-	1
WEST SOUTH CENTRAL...	2	2	-	-	-	1	-	-	1	-	1	4
Arkansas.....	-	-	-	-	-	1	-	-	1	-	-	-
Louisiana.....	1	-	-	-	-	-	-	-	-	-	1	1
Oklahoma.....	-	-	-	-	-	-	-	-	-	-	-	-
Texas.....	1	2	-	-	-	-	-	-	-	-	-	3
MOUNTAIN.....	-	4	1	-	-	-	-	-	-	-	-	-
Montana.....	-	-	-	-	-	-	-	-	-	-	-	-
Idaho.....	-	-	-	-	-	-	-	-	-	-	-	-
Wyoming.....	-	-	-	-	-	-	-	-	-	-	-	-
Colorado.....	-	4	1	-	-	-	-	-	-	-	-	-
New Mexico.....	-	-	-	-	-	-	-	-	-	-	-	-
Arizona.....	-	-	-	-	-	-	-	-	-	-	-	-
Utah.....	-	-	-	-	-	-	-	-	-	-	-	-
Nevada.....	-	-	-	-	-	-	-	-	-	-	-	-
PACIFIC.....	7	1	4	10	-	-	1	-	-	1	-	-
Washington.....	-	-	1	-	-	-	-	-	-	-	-	-
Oregon.....	-	-	1	-	-	-	-	-	-	-	-	-
California.....	6	1	2	9	-	-	1	-	-	1	-	-
Alaska.....	-	-	-	1	-	-	-	-	-	-	-	-
Hawaii.....	1	-	-	-	-	-	-	-	-	-	-	-
Puerto Rico	-	-	-	-	-	-	-	-	-	-	1	1

Table 3. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

FEBRUARY 6, 1965 AND FEBRUARY 1, 1964 (5TH WEEK) - CONTINUED

Area	Brucellosis	Infectious Hepatitis including Serum Hepatitis					Meningococcal Infections			Tetanus	
		Total incl. unk.	Under 20 years	20 years and over	Cumulative Totals			Cumulative			Cum.
	1965	1965	1965	1965	1965	1964	1965	1965	1964	1965	1965
UNITED STATES...	-	891	516	333	3,995	4,465	61	319	272	5	17
NEW ENGLAND.....	-	64	30	30	252	560	1	16	8	-	1
Maine.....	-	15	12	3	59	226	-	4	-	-	-
New Hampshire.....	-	5	1	4	20	63	-	-	-	-	1
Vermont.....	-	9	2	4	29	59	-	-	-	-	-
Massachusetts.....	-	15	9	5	72	105	1	8	1	-	-
Rhode Island.....	-	11	1	10	29	22	-	1	2	-	-
Connecticut.....	-	9	5	4	43	85	-	3	5	-	-
MIDDLE ATLANTIC.....	-	164	105	59	794	1,012	8	44	37	-	1
New York City.....	-	23	5	18	128	139	1	10	7	-	-
New York, Up-State.	-	86	70	16	380	504	1	9	13	-	1
New Jersey.....	-	15	3	12	97	144	5	17	5	-	-
Pennsylvania.....	-	40	27	13	189	225	1	8	12	-	-
EAST NORTH CENTRAL...	-	183	117	58	741	631	7	40	36	-	-
Ohio.....	-	58	33	23	248	185	2	15	13	-	-
Indiana.....	-	15	8	7	44	44	1	6	4	-	-
Illinois.....	-	55	40	11	146	76	1	9	8	-	-
Michigan.....	-	47	30	17	257	299	2	6	10	-	-
Wisconsin.....	-	8	6	-	46	27	1	4	1	-	-
WEST NORTH CENTRAL...	-	60	33	22	293	263	3	17	10	-	2
Minnesota.....	-	6	-	4	24	15	-	3	3	-	1
Iowa.....	-	29	17	11	145	40	-	-	-	-	-
Missouri.....	-	8	5	1	48	55	3	9	5	-	1
North Dakota.....	-	-	-	-	2	17	-	3	1	-	-
South Dakota.....	-	1	-	1	5	17	-	-	-	-	-
Nebraska.....	-	1	-	1	6	7	-	-	-	-	-
Kansas.....	-	15	11	4	63	112	-	2	1	-	-
SOUTH ATLANTIC.....	-	61	33	23	385	429	9	70	66	1	6
Delaware.....	-	2	-	2	7	3	-	2	-	-	-
Maryland.....	-	13	8	5	71	79	-	3	9	1	1
Dist. of Columbia..	-	1	-	1	4	8	1	2	-	-	-
Virginia.....	-	11	3	4	70	49	3	12	6	-	1
West Virginia.....	-	17	16	1	91	67	-	6	4	-	-
North Carolina.....	-	9	3	6	49	102	4	13	8	-	-
South Carolina.....	-	2	2	-	13	14	-	5	12	-	-
Georgia.....	-	-	-	-	20	9	1	13	6	-	3
Florida.....	-	6	1	4	60	98	-	14	21	-	1
EAST SOUTH CENTRAL...	-	76	51	22	248	326	6	21	22	-	1
Kentucky.....	-	29	19	7	90	168	-	7	5	-	-
Tennessee.....	-	22	16	6	87	100	3	7	10	-	1
Alabama.....	-	16	9	7	44	40	3	7	6	-	-
Mississippi.....	-	9	7	2	27	18	-	-	1	-	-
WEST SOUTH CENTRAL...	-	84	39	37	406	275	8	37	38	2	3
Arkansas.....	-	15	8	7	51	45	1	3	4	1	1
Louisiana.....	-	12	6	6	59	43	5	11	13	-	-
Oklahoma.....	-	2	-	1	23	15	-	6	2	-	-
Texas.....	-	55	25	23	273	172	2	17	19	1	2
MOUNTAIN.....	-	39	22	8	205	299	2	10	15	1	1
Montana.....	-	9	6	3	24	30	-	-	-	-	-
Idaho.....	-	1	-	-	37	22	-	-	1	-	-
Wyoming.....	-	2	2	-	16	3	-	-	1	-	-
Colorado.....	-	11	6	4	20	66	-	1	6	1	1
New Mexico.....	-	4	4	-	35	68	-	5	5	-	-
Arizona.....	-	6	-	-	47	62	-	2	-	-	-
Utah.....	-	5	4	1	24	42	1	1	1	-	-
Nevada.....	-	1	-	-	2	6	1	1	1	-	-
PACIFIC.....	-	160	86	74	671	670	17	64	40	1	2
Washington.....	-	11	4	7	59	82	-	-	3	-	-
Oregon.....	-	10	7	3	63	60	1	3	-	-	-
California.....	-	122	66	56	491	484	16	60	34	1	2
Alaska.....	-	17	9	8	53	31	-	1	1	-	-
Hawaii.....	-	-	-	-	5	13	-	-	2	-	-
Puerto Rico	-	19	15	4	46	30	-	-	2	4	4

Table 3. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDED
FEBRUARY 6, 1965 AND FEBRUARY 1, 1964 (5TH WEEK) - CONTINUED

Area	Measles			Strept. Sore Th. & Scarlet Fev.	Tularemia		Typhoid Fever		Rabies in Animals	
		Cumulative				Cum.		Cum.		Cum.
	1965	1965	1964	1965	1965	1965	1965	1965	1965	1965
UNITED STATES...	7,994	34,387	29,002	11,713	2	31	6	32	90	458
NEW ENGLAND.....	1,751	8,860	1,762	973	-	-	-	-	1	7
Maine.....	163	1,067	173	39	-	-	-	-	-	-
New Hampshire.....	21	156	11	5	-	-	-	-	-	-
Vermont.....	73	101	478	42	-	-	-	-	1	6
Massachusetts.....	1,083	5,192	312	141	-	-	-	-	-	-
Rhode Island.....	196	1,027	107	30	-	-	-	-	-	-
Connecticut.....	215	1,317	681	716	-	-	-	-	-	1
MIDDLE ATLANTIC.....	211	1,170	5,756	546	-	-	-	2	3	16
New York City.....	18	138	2,231	24	-	-	-	1	-	-
New York, Up-State.	40	382	1,242	337	-	-	-	1	3	14
New Jersey.....	36	202	1,047	74	-	-	-	-	-	-
Pennsylvania.....	117	448	1,236	111	-	-	-	-	-	2
EAST NORTH CENTRAL...	1,446	5,993	5,782	1,278	-	-	2	3	5	22
Ohio.....	156	1,157	864	222	-	-	-	-	-	-
Indiana.....	57	266	1,248	245	-	-	-	-	-	4
Illinois.....	50	197	1,824	208	-	-	1	1	1	3
Michigan.....	895	3,199	1,356	407	-	-	1	1	3	7
Wisconsin.....	288	1,174	490	196	-	-	-	1	1	8
WEST NORTH CENTRAL...	554	2,481	711	477	-	2	-	1	15	85
Minnesota.....	18	51	9	5	-	-	-	-	7	26
Iowa.....	119	1,198	222	99	-	-	-	-	-	24
Missouri.....	81	256	86	49	-	1	-	1	-	11
North Dakota.....	321	863	385	207	-	-	-	-	1	7
South Dakota.....	3	23	3	37	-	-	-	-	3	6
Nebraska.....	12	90	6	-	-	-	-	-	-	4
Kansas.....	NN	NN	NN	80	-	1	-	-	4	7
SOUTH ATLANTIC.....	1,189	5,068	3,303	1,671	1	12	2	11	16	70
Delaware.....	8	74	32	9	-	-	-	1	-	-
Maryland.....	21	76	554	373	-	-	1	4	-	2
Dist. of Columbia..	6	9	55	14	-	-	-	-	-	-
Virginia.....	136	721	693	295	-	3	1	1	15	57
West Virginia.....	965	3,783	1,067	648	-	-	-	1	-	1
North Carolina.....	19	89	102	10	-	2	-	4	-	-
South Carolina.....	2	40	528	38	-	2	-	-	-	-
Georgia.....	-	94	89	2	1	5	-	-	-	4
Florida.....	32	182	183	282	-	-	-	-	1	6
EAST SOUTH CENTRAL...	426	1,797	3,803	1,583	1	8	-	2	30	167
Kentucky.....	59	143	2,005	128	-	1	-	-	-	6
Tennessee.....	252	1,188	1,586	1,304	1	6	-	1	30	156
Alabama.....	109	332	103	41	-	1	-	1	-	5
Mississippi.....	6	134	109	110	-	-	-	-	-	-
WEST SOUTH CENTRAL...	929	3,053	1,984	1,181	-	6	-	8	13	62
Arkansas.....	15	40	84	10	-	3	-	3	3	10
Louisiana.....	2	7	4	-	-	-	-	1	2	19
Oklahoma.....	8	29	18	139	-	3	-	1	3	11
Texas.....	904	2,977	1,878	1,032	-	-	-	3	5	22
MOUNTAIN.....	694	3,000	1,267	1,616	-	3	1	3	7	14
Montana.....	292	1,117	336	84	-	-	-	-	1	2
Idaho.....	73	433	193	218	-	-	-	-	-	-
Wyoming.....	35	91	12	56	-	-	-	1	-	-
Colorado.....	55	357	146	552	-	-	-	-	-	-
New Mexico.....	7	60	53	253	-	-	-	1	-	-
Arizona.....	16	73	365	199	-	-	1	1	6	12
Utah.....	213	863	109	253	-	3	-	-	-	-
Nevada.....	3	6	53	1	-	-	-	-	-	-
PACIFIC.....	794	2,965	4,634	2,388	-	-	1	2	-	15
Washington.....	209	832	1,619	430	-	-	-	-	-	-
Oregon.....	113	586	559	29	-	-	-	-	-	-
California.....	398	1,206	2,021	1,731	-	-	1	1	-	15
Alaska.....	8	33	404	83	-	-	-	-	-	-
Hawaii.....	66	308	31	115	-	-	-	1	-	-
Puerto Rico	22	127	323	10	-	-	-	-	1	1

Week No. Table 4. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED FEBRUARY 6, 1965

(By place of occurrence and week of filing certificate. Excludes fetal deaths)

Area	All Causes		Pneumonia and Influenza All Ages	Under 1 year All Causes
	All Ages	65 years and over		
NEW ENGLAND:	933	626	75	35
Boston, Mass.*	317	199	21	12
Bridgeport, Conn.	57	37	10	5
Cambridge, Mass.	29	24	-	1
Fall River, Mass.	33	22	2	1
Hartford, Conn.	63	36	-	3
Lowell, Mass.	44	28	7	2
Lynn, Mass.	28	20	2	2
New Bedford, Mass.	30	22	1	2
New Haven, Conn.	62	44	3	-
Providence, R. I.	73	49	7	2
Somerville, Mass.	15	13	1	-
Springfield, Mass.	65	47	13	3
Waterbury, Conn.	42	32	1	2
Worcester, Mass.	75	53	7	-
MIDDLE ATLANTIC:	3,646	2,172	198	199
Albany, N. Y.	53	31	2	1
Allentown, Pa.	48	30	3	-
Buffalo, N. Y.	168	106	8	14
Camden, N. J.	38	23	3	5
Elizabeth, N. J.	46	33	5	2
Erie, Pa.	41	28	-	4
Jersey City, N. J.	94	48	4	4
Newark, N. J.	125	67	11	9
New York City, N. Y.	1,821	1,056	101	100
Paterson, N. J.	52	30	4	7
Philadelphia, Pa.	500	304	21	20
Pittsburgh, Pa.	236	133	6	8
Reading, Pa.	70	41	4	4
Rochester, N. Y.	93	69	13	8
Schenectady, N. Y.	26	19	1	-
Scranton, Pa.	48	31	-	2
Syracuse, N. Y.	72	44	2	3
Trenton, N. J.	47	26	4	2
Utica, N. Y.	45	34	5	6
Yonkers, N. Y.	23	19	1	-
EAST NORTH CENTRAL:	2,725	1,537	93	163
Akron, Ohio	66	35	1	5
Canton, Ohio	38	20	5	2
Chicago, Ill.	825	456	34	53
Cincinnati, Ohio	151	91	4	7
Cleveland, Ohio	201	107	-	12
Columbus, Ohio	128	78	1	4
Dayton, Ohio	81	53	3	5
Detroit, Mich.	404	221	15	28
Evansville, Ind.	48	32	2	2
Flint, Mich.	62	35	1	1
Fort Wayne, Ind.	57	36	4	6
Gary, Ind.	22	7	4	2
Grand Rapids, Mich.	51	32	3	2
Indianapolis, Ind.	166	84	5	13
Madison, Wis.	26	10	-	3
Milwaukee, Wis.	122	77	1	3
Peoria, Ill.	36	18	-	5
Rockford, Ill.	19	7	2	1
South Bend, Ind.	48	28	3	3
Toledo, Ohio	104	63	4	4
Youngstown, Ohio	70	47	1	2
WEST NORTH CENTRAL:	928	573	35	50
Des Moines, Iowa	64	47	3	2
Duluth, Minn.	36	26	-	3
Kansas City, Kans.	48	25	2	6
Kansas City, Mo.	149	101	6	6
Lincoln, Nebr.	34	22	1	2
Minneapolis, Minn.	128	81	3	5
Omaha, Nebr.	68	38	6	2
St. Louis, Mo.	274	155	6	15
St. Paul, Minn.	88	52	1	8
Wichita, Kans.	39	26	7	1
SOUTH ATLANTIC:	1,284	663	74	93
Atlanta, Ga.	145	62	13	20
Baltimore, Md.	298	169	10	13
Charlotte, N. C.	38	19	4	6
Jacksonville, Fla.	83	39	1	4
Miami, Fla.	107	58	2	6
Norfolk, Va.	57	22	2	6
Richmond, Va.	87	49	2	5
Savannah, Ga.	34	15	3	-
St. Petersburg, Fla.	85	65	9	1
Tampa, Fla.	78	35	9	3
Washington, D. C.	226	103	16	28
Wilmington, Del.	46	27	3	1
EAST SOUTH CENTRAL:	599	312	23	44
Birmingham, Ala.	77	42	-	1
Chattanooga, Tenn.	55	35	3	6
Knoxville, Tenn.	34	25	1	1
Louisville, Ky.	111	57	8	3
Memphis, Tenn.	157	77	3	20
Mobile, Ala.	48	17	2	5
Montgomery, Ala.	33	13	3	5
Nashville, Tenn.	84	46	3	3
WEST SOUTH CENTRAL:	1,120	563	54	107
Austin, Tex.	42	26	6	4
Baton Rouge, La.	34	19	1	4
Corpus Christi, Tex.	23	13	-	2
Dallas, Tex.	160	84	6	14
El Paso, Tex.*	39	19	3	6
Fort Worth, Tex.	83	49	9	13
Houston, Tex.	189	86	7	10
Little Rock, Ark.	66	28	2	8
New Orleans, La.	200	91	10	26
Oklahoma City, Okla.	62	22	3	6
San Antonio, Tex.	131	76	2	8
Shreveport, La.	47	21	4	5
Tulsa, Okla.	44	29	1	1
MOUNTAIN:	366	190	16	23
Albuquerque, N. Mex.	28	15	2	4
Colorado Springs, Colo.	15	11	3	-
Denver, Colo.	119	58	5	8
Ogden, Utah	15	9	1	-
Phoenix, Ariz.	95	50	4	7
Pueblo, Colo.	16	10	-	-
Salt Lake City, Utah	35	18	-	2
Tucson, Ariz.	43	19	1	2
PACIFIC:	1,727	1,024	62	108
Berkeley, Calif.	21	14	2	2
Fresno, Calif.	47	20	-	9
Glendale, Calif.	36	28	-	1
Honolulu, Hawaii	46	25	-	4
Long Beach, Calif.	71	44	1	5
Los Angeles, Calif.	704	409	33	52
Oakland, Calif.	105	68	2	3
Pasadena, Calif.	20	12	-	1
Portland, Oreg.	99	64	2	5
Sacramento, Calif.*	69	42	2	5
San Diego, Calif.	84	43	1	1
San Francisco, Calif.	192	105	6	9
San Jose, Calif.	33	22	6	3
Seattle, Wash.	129	73	4	5
Spokane, Wash.	39	31	3	2
Tacoma, Wash.	32	24	-	1
Total	13,328	7,660	630	822

*Estimate - based on average percent of divisional total.

Cumulative Totals
including reported corrections for previous weeks

All Causes, All Ages	68,703
All Causes, Age 65 and over	39,190
Pneumonia and Influenza, All Ages	3,226
All Causes, Under 1 Year of Age	4,094

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INTERNATIONAL NOTES – QUARANTINE MEASURES

Immunization Information for International Travel 1963-64 edition – Public Health Service Publication No. 384

Section 5

ASIA

Saudi Arabia, page 53

Delete NOTE and insert:

During the period 5 November 1964 to 30 April 1965 (season of periodic mass congregations):

Cholera – All arrivals are required to possess a certificate showing 2 injections at one week's interval; one injection given before the expiry of the validity of the certificate extends the validity for a further period of 6 months. All arrivals from infected areas must further possess a certificate showing that prior to arrival they have spent 5 days in an area free of cholera (time spent on board a vessel may be considered as a period spent in a cholera-free area).

The following information should be added to the list of Yellow Fever Vaccination Centers in Section 6:

Page 76

City:	Erie, Pennsylvania
Center:	Erie County Department of Health 2101 Peach Street Tel: GL 2-3950
Clinic Hours:	2:00 – 3:30 p.m. 1st & 3rd Wed. of each month
Fee:	Yes

THE MORBIDITY AND MORTALITY WEEKLY REPORT, WITH A CIRCULATION OF 13,000 IS PUBLISHED BY THE COMMUNICABLE DISEASE CENTER, ATLANTA, GEORGIA 30333.

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IN ADDITION TO THE ESTABLISHED PROCEDURES FOR REPORTING MORBIDITY AND MORTALITY, THE COMMUNICABLE DISEASE CENTER WELCOMES ACCOUNTS OF INTERESTING OUTBREAKS OR CASES. SUCH ACCOUNTS SHOULD BE ADDRESSED TO:

THE EDITOR
MORBIDITY AND MORTALITY WEEKLY REPORT
COMMUNICABLE DISEASE CENTER
ATLANTA, GEORGIA 30333

NOTE: THESE PROVISIONAL DATA ARE BASED ON WEEKLY TELEGRAMS TO THE CDC BY THE INDIVIDUAL STATE HEALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES ON SATURDAY; COMPILED DATA ON A NATIONAL BASIS ARE RELEASED ON THE SUCCEEDING FRIDAY.

SYMBOLS:---DATA NOT AVAILABLE
- QUANTITY ZERO

THE CONSTRUCTION OF THE MORTALITY CURVES IS DESCRIBED IN VOL. 14, NO. 1.

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
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